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Attorney's Docket No. NIH168.001C1

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DECLARATION AND POWER OF ATTORNEY - USA PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled ICHTHYOSIFORM SKIN DISEASES; the specification of which was filed on **December 13, 2001** as Application Serial No. **10/023,275**.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above;

I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56;

I hereby claim the benefit under Title 35, United States Codes § 119(e) of any United States provisional application(s) listed below.

Application No.: 60/140,656

Filing Date: 6/23/1999

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below, and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56, which became available between the filing date of the prior application and the national or PCT international filing date of this application:

Prior U.S.A. Application(s)

Serial No.: PCT/US00/17235

Filing Date: 6/22/2000

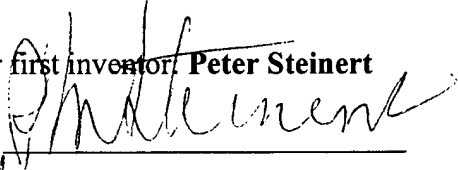
Status: **Pending**

POWER OF ATTORNEY: I hereby appoint the registrants of National Institutes of Health Offices of Technology Transfer, 6011 Executive Boulevard, Suite 325, Rockville, MD 20852, telephone (301) 496-7056, **Customer No. 005318**.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are

punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful, false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: **Peter Steinert**

Inventor's signature 

Date 

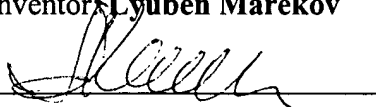
Residence: **Bethesda, MD**

Citizenship: **USA**

Post Office Address: **6303 Berkshire Drive, Bethesda, MD 20814**

Full name of Second inventor: **Lyuben Marekov**

Inventor's signature



Date

07-29-02

Residence: **Rockville, MD**

Citizenship: **Bulgaria**

Post Office Address: **6010 California Circle, Apartment 405, Rockville, MD 20852**

Full name of Third inventor: **Zoltan Nemes**

Inventor's signature Zoltan Nemes

Date 07/19/2002

Residence: **Debrecen, Hungary**

Citizenship: **Hungary**

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PATENT

ASSIGNMENT

WHEREAS, we, Peter Steinert, 6303 Berkshire Drive, Bethesda, MD 20814, citizenship: USA; Lyuben Marekov, 6010 California Circle, Apt. 405, Rockville, MD 20852; citizenship: Bulgaria; Zoltan Nemes, Dienes Janos u.23, h-4029 Debrecen, Hungary; citizenship: Hungary, employees of the Department of Health and Human Services, have invented ICHTHYOSIFORM SKIN DISEASES, for which we have made application for Letters Patent of the United States Serial No. 10/023,275 filed December 13, 2001, which claims the benefit of priority of International Application No. PCT/US00/17235 filed June 22, 2000, which claims the benefit of priority of U.S. Application No. 60/140,656 filed June 23, 1999;

WHEREAS, we are the applicants named in the above-identified application for Letters Patent;

WHEREAS, the conditions under which said invention was made are such as to entitle the Government under Paragraph 1(a) of Executive Order 10096 to the entire right, title, and interest herein, both domestic and foreign; and

WHEREAS, the Government of the United States is desirous of acquiring all domestic and foreign right, title and interest in the above-mentioned invention described in the application for Letters Patent; and

NOW, THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, we hereby assign and transfer to the United States of America, represented by the Secretary, Department of Health and Human Services, the full and exclusive rights in and to said invention in the U.S. and within each and every foreign country in which the Government elects to file and the entire right, title and interest in and to such applications, and any continuations, continuations-in-part, divisions, reissues or extensions thereof, and including priority rights as may be filed in the U.S. and foreign countries, and such Letters Patent as may be granted to be held by the Government to the end of the term for which the same would have been held by the inventors had this assignment not been made.

We further agree to make, execute and deliver to the Secretary, Department of Health and Human Services, upon request, any and all papers, documents, affidavits or other instruments that may be necessary in the prosecution of any application or applications for improvements or reissues of Letters Patent, and to assist the Government in every way as may be requested in protecting said invention, provided that any expense of extending such assistance shall be paid by the Government.

IN WITNESS WHEREOF, I hereunto set my hand and seal this 29th day of July, 2002

Peter Steinert
Peter Steinert

STATE OF MD

COUNTY OF Montgomery ss.

On this 29th day of July, 2002, before me, a Notary Public in and for the State and County aforesaid, personally appeared Peter Steinert, personally known to me or proven on the basis of satisfactory evidence to be the person of that name, who signed and sealed the foregoing instrument, and acknowledged the same to be his/her free act and deed.

Justine Nebira-Khasamba
Notary Public in and for the aforesaid County and State
My Commission Expires: 06-28-05

JUSTINE NEBIRA-KHASAMBA
NOTARY PUBLIC STATE OF MARYLAND
My Commission Expires June 28, 2005

Client Code : Nlh168.001C1
Serial No. : 10/023,275
Filing Date : December 13, 2001

IN WITNESS WHEREOF, I hereunto set my hand and seal this 29th day of July, 2002

Lyuben Marekov

STATE OF

COUNTY OF

ss.

On this 29th day of July, 2002, before me, a Notary Public in and for the State and County aforesaid, personally appeared Lyuben Marekov, personally known to me or proven on the basis of satisfactory evidence to be the person of that name, who signed and sealed the foregoing instrument, and acknowledged the same to be his/her free act and deed.

Justine Nebira-Khasamba
Notary Public in and for the aforesaid County and State

My Commission Expires: 06-28-05

JUSTINE NEBIRA-KHASAMBA
NOTARY PUBLIC STATE OF MARYLAND
My Commission Expires June 28, 2005

Client Code : NIh168.001C1
Serial No. : 10/023,275
Filing Date : December 13, 2001

IN WITNESS WHEREOF, I hereunto set my hand and seal this 19 day of 07, 2002

Zoltan Nemes
Zoltan Nemes

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